FORM D



IINTTED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 460, AND/OR

12/0	
OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ge burden
hours perrespor	nse 16.00

SEC USE ONLY

DATE RÉCEIVED

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	I/ A N
UNIFORM LIMITED OFFERING EXEMP	TION
Name of Offering (check if this is an amendment and name has changed, and indicate change.) The Millennium BullionFund	CHEINED CO.
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	187 /8/
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
The Millennium BullionFund	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
40 King St. West, Ste 4900 Toronto, Ontario M5H 4A2	(888) 474-1001
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
investment fund investing in commodities/precious metals	
Type of Business Organization	
☐ corporation ☐ limited partnership, already formed ☐ other (ple ☐ business trust ☐ limited partnership, to be formed	asse specify): investment trust OCESSED
Month Year Actual or Estimated Date of Incorporation or Organization: [0] 1 0] 2 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	NOV 18 2003
CN for Canada; FN for other foreign jurisdiction)	THOMSON THOMSON

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDE	NTIFICATION DATA		
2. Enter the information requ	ested for the fol	lowing:			
 Each promoter of the 	issuer, if the iss	uer has been organized wi	ithin the past five years;		
 Each beneficial owner 	having the pow	er to vote or dispose, or dir	ect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
 Ezch executive office 	and director of	corporate issuers and of	corporate general and man	aging partners of	partnership issuers; and
 Each general and man 	aging partner of	f partnership issuers.			
Check Box(es) that Apply:] Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Bullion Managemer	t Services	s Inc.			
Business or Residence Address			de)		
40 King St. West, St.	te. 4900	Toronto, Onta	ario M5H 4A2		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Barisheff, Nick					
Business or Residence Address	•	Street, City, State, Zip Co	•		
40 King St. West, S	te. 4900	Toronto, Onta	rio M5H 4A2		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Gamble, Larry					
Business or Residence Address	(Number and	Street, City, State, Zip Co	de)		
40 King St. West, St	te 4900	Toronto, Onta	rio M5H 4A2		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)			• • • •	
Chapman, David	•				
Business or Residence Address	(Number and S	Street, City, State, Zip Co	de)		
40 King St. West, St		Toronto, Onta			
Check Box(es) that Apply:	-	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and S	Street, City, State, Zip Co.	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address (Number and Street, City, State, Zip Code)					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and S	Street, City, State, Zip Coo	ie)		
	(Use blan	k sheet, or copy and use a	dditional copies of this sh	eet, as necessary)	

				je j≕B.	INFORMA	FION ABO	UT/OFFER	ing., ±				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No ☑				
Answer also in Appendix, Column 2, if filing under ULOE.							· 🏳	Ľ				
What is the minimum investment that will be accepted from any individual?							. \$ <u>50,</u>	000				
2 Door	tha affanin 1			:	0ءنسنہ ما						Yes	No
										directly an	_	<u>.</u> .
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									;, e			
Full Name	(Last name	first, if inc	dividual)									
N/A Business or	r Residence	Address ()	Number an	d Street, C	City, State,	Zip Code)						
		-		, 								
Name of A	ssociated B	roker or De	ealer									
States in W	hich Perso	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchaser	S			ь.		
(Check	c "All State	s" or check	individua	l States)		•••••	••••		······	•••••	Al	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
IL	[N]	IA NV	KS	KY	LA	ME	MD	MA ND	MI	MN	MS	MO
MT RI	NE SC	SD	NH TN	NJ TX	NM UT	NY VT	NC VA	WA	OH WV	OK WI	OR	PA PR
Full Name ((Tast name	first if in A	ividual)						 			
run ivaine ((Last Haille	mst, mma	ividual)									
Business of	r Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)	,					
Name of As	sociated B	roker or De	aler									
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	s" or check	individual	States)	•••••			•••••			All All	States
AL IL MT	AK IN NE	AZ IA NV	AR KS NH	CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	\overline{WY}	PR
ull Name (Last name	first, if indi	vidual)									·
usiness or	Residence	Address (A	Jumher and	Street C	ity State 3	7in Code)			111-1111			
				. 50000, 0	, otato, 2							
lame of Ass	sociated Br	oker or Dea	ıler									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)												
												\vdash

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

AND COTTERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify Units of mutual fund trust)	\$ <u>5,000,000</u>	<u>\$ 550,000</u>
	Total	\$ <u>5,000,000</u>	\$ <u>550,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	2	_{\$} 550,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 20,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$
	Total		\$ 20,000

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	-Question 4.a. This difference is the "adjusted gros	ss -	s_4,980,000
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate an If the payments listed must equal the adjusted gros	d	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	***************************************	\$ 125,000	
	Purchase of real estate		 .□\$	
	Purchase, rental or leasing and installation of man		s	s
	Construction or leasing of plant buildings and fac	cilities	. \$	s
	Acquisition of other businesses (including the val offering that may be used in exchange for the assissuer pursuant to a merger)	ets or securities of another		_ _
	Repayment of indebtedness		_	*****
	Working capital			
	Other (specify): purchase of commodities			S 4,855,000
	Other (specify): P-4-1-5 is communicated		□•	M 2 4,000,000
			s	s
	Column Totals		[7] \$ 125,000	✓ \$ 4,855,000
	Total Payments Listed (column totals added)	_ . ☑\$ <u>4</u>	,980,000	
	塞克斯特 经工作结合性 医皮肤 化自己分子 计	D. FEDERAL SIGNATURE		
શંજી	issuer has duly caused this notice to be signed by the lature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Comm	ission, upon writte	ale 505, the following on request of its staff,
İsst	er (Print or Type)	Signature	Date	
Th	e Millennium BullionFund, an Ontario Trust		Nov 14	/2003
	ne of Signer (Print or Type) k Barisheff	Title of Signer (Print or Type) President and CEO of Bullion Managemen and Manager		·

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE			}			
I.	Is any party described in 17 CFR 230.262 proprovisions of such rule?	· ·		Yes	No ☑			
	See .	Appendix, Column 5, for state response.						
2.	 The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law. 							
3.	 The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by issuer to offerees. 							
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Unifor limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
	ter has read this notification and knows the conte thorized person.	nts to be true and has duly caused this notice	to be signed on its beha	lf by the	undersigned			
•	Print or Type)	Signature	Date Nov14/2					
The Mil	llennium BullionFund Trust, an Ontario Trust		NOU14/2	003				
Name (f	Print or Type)	Title (Print or Type)						

President & CEO of Bullion Management Services Inc. - Trustee and Manager

Instruction:

Nick Barisheff

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.